

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Nurses United for Patient Protection		FEC IDENTIFICATION NUMBER ▼ C C00490375
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee POSTAL SYSTEMS, INC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 28 / 2022
Mailing Address 1568 Cherrywood Drive		Amount 199306.35
City San Mateo	State CA	Zip Code 94403
Purpose of Expenditure Postage (estimated amount) & Processing of Mailer (Warnock)		Transaction ID : B836833
Category/Type 001		Date of Disbursement or Obligation MM / DD / YYYY 11 / 17 / 2022
Name of Federal Candidate Warnock, Raphael, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff General
		267097.71

Full Name of Payee Autumn Press		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 28 / 2022
Mailing Address 945 Camelia Street		Amount 25620.36
City Berkeley	State CA	Zip Code 94710
Purpose of Expenditure Postcard mailers starting 11/28/22		Transaction ID : B836956
Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 11 / 22 / 2022
Name of Federal Candidate Warnock, Raphael, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff General
		267097.71

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	224926.71
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kuhl, Martha, ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 29 / 2022

Signature